# **APPLICATION DATA SHEET**

### **APPLICATION INFORMATION**

Application Type:: Regular
Subject Matter:: Utility
CD-ROM or CD-R?:: None

Number of CD disks::

Number of copies of CDs::

Sequence submission?:: None
Computer Readable Form (CRF)?:: No

Number of copies of CRF::

Title:: Crystalline Acetic Acid Solvate Of

Meloxicam

Attorney Docket Number:: 1/1398

Request for Early Publication?:: No
Request for Non-Publication?:: No
Total Drawing Sheets:: 1
Small Entity?:: No
Petition included?:: No

Secrecy Order in Parent Appl.?:: No

## **APPLICANT INFORMATION**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Germany

Status:: Full Capacity

Given Name:: Guenter

Family Name:: TRUMMLITZ
City of Residence:: Warthausen
Country of Residence:: Germany

Street of mailing address::

City of mailing address::

Country of mailing addr ss::

Country of mailing addr ss::

Germany

88447

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Germany

Status:: Full Capacity

Given Name:: Rainer
Family Name:: SOYKA
City of Residence:: Biberach

Country of Residence:: Germany

Street of mailing address:: Geschwister-Scholl-Strasse 43

City of mailing address::

Country of mailing address::

Biberach

Germany

Postal or Zip Code of mailing address::

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Applicant Authority Type:: Inventor

Primary Citizenship Country:: Germany

Status:: Full Capacity

Given Name:: Peter

Family Name:: SIEGER

City of Residence:: Mittelbiberach

Country of Residence:: Germany

Street of mailing address:: Wielandstrasse 27

City of mailing address:: Mittelbiberach

Country of mailing address:: Germany

Postal or Zip Code of mailing address:: 88441

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Germany

Status:: Full Capacity

Given Name:: Ulrike

Family Name:: WERTHMANN

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Country of Residence:: Germany

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Country of mailing address::

Germany

Postal or Zip Code of mailing address::

88400

**Applicant Authority Type::** 

Inventor

**Primary Citizenship Country::** 

Germany

Status::

**Full Capacity** 

Given Name::

Peter

Family Name::

**LUGER** 

City of Residence::

Berlin

Country of Residence::

Germany

Street of mailing address::

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City of mailing address::

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Country of mailing address::

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Postal or Zip Code of mailing address::

14167

**CORRESPONDENCE INFORMATION** 

**Correspondence Customer Number::** 

28501

REPRESENTATIVE INFORMATION

Representative Customer Number::

28501

### DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Non-Provisional of	60/428,617	11/22/2002

# FOREIGN PRIORITY INFORMATION

Country::	Application Number::	Filing Date::	Priority Claimed::
DE	102 45 882	09/30/2002	Yes

### **ASSIGNEE INFORMATION**

Assignee name::

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